
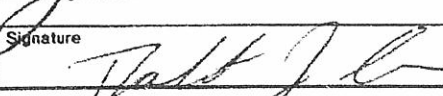
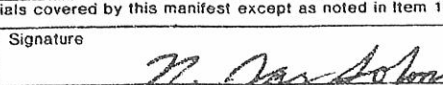


Please print or type. (Form designed for use on elite (12-pitch typewriter).)

<b>HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. CAD 981 387 988		Manifest Document No. 4 6 6 6 2		2. Page 1 of		Information in the shaded areas is not required by Federal law.	
Generator's Name and Mailing Address COLUMBIA SHOWCASE 1103 SHERMAN WAY, SUN VALLEY, CA. 91352						A. State Manifest Document Number 88346662			
4. Generator's Phone (213 875-1210)						B. State Generator's ID			
5. Transporter 1 Company Name OMEGA RECOVERY SERVICES				6. US EPA ID Number CAD 042 245 001		C. State Transporter's ID 208952			
7. Transporter 2 Company Name				8. US EPA ID Number		D. Transporter's Phone 213/698-0991			
9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 12504 E. WHITTIER BLVD. WHITTIER, CA. 90602						10. US EPA ID Number CAD 042 245 001			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) a. WASTE METHYL ETHYL KETONE, FLAMMABLE LIQUID UN 1993						12. Containers No. Type 007 DM		13. Total Quantity 003856	
b.						14. Unit Wt/Vol		1. Waste No. State 212 EPA/Other F003	
c.						15. Special Handling Instructions and Additional Information Profile#B10233		*Emergency#213/875-1210	
d.						K. Handling Codes for Wastes Listed Above a. 01		b.	
J. Additional Descriptions for Materials Listed Above a. -Material for disposal						c.		d.	

**GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name Jim Barrera		Signature 		Month Day Year 10/9/27/91	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name ROBERT J CIRINGEON		Signature 		Month Day Year 10/9/27/91	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name N. JAY SOLOMON					
Signature 		Month Day Year 10/9/27/91			

Do Not Write Below This Line

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

To: P.O. Box 3000, Sacramento, CA 95812

IN CASE OF AN EMERGENCY, CALL 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY